Form 210A (10/06)

# United States Bankruptcy Court Southern District Of New York

In re Lehman Brothers Holdings Inc., et al.,

Case No. 08-13555 (SCC) (Jointly Administered)

## TRANSFER OF CLAIM OTHER THAN FOR SECURITY

A CLAIM HAS BEEN FILED IN THIS CASE or deemed filed under 11 U.S.C. § 1111(a). Transferee hereby gives evidence and notice pursuant to Rule 3001(e)(2), Fed. R. Bankr. P., of the transfer, other than for security, of the claim referenced in this evidence and notice.

#### Name of Transferee

#### Name of Transferor

Deutsche Bank AG, London Branch

The Värde Fund VI-A, L.P.

Name and Address where notices to transferee should be sent:

Deutsche Bank AG, London Branch Winchester House, 1 Great Winchester Street

London EC2N 2DB Tel: +44 20 7547 2400 Fax: +44 113 336 2010 Attention: Michael Sutton

E-mail: Michael.sutton@db.com

Court Claim # and Date Claim Filed:

- (i) 44551 October 23, 2009
- (ii) 44575 October 23, 2009
- (iii) 44572 October 23, 2009
- (iv) 44552 October 23, 2009 (v) 44611 – October 23, 2009
- (v) 44611 October 23, 2009 (vi) 44606 – October 23, 2009
- (vii) 44571 October 23, 2009

#### Amount of Claim (transferred):

- (i) CHF 57,000.00 in principal amount of ISIN XS0228154158 (plus all interest, costs and fees relating to this claim)
- (ii) CHF 23,000.00 in principal amount of ISIN XS0268576609 (plus all interest, costs and fees relating to this claim)
- (iii) CHF 46,000.00 in principal amount of ISIN CH0027120655 (plus all interest, costs and fees relating to this claim)
- (iv) CHF 24,000.00 in principal amount of ISIN XS0226787447 (plus all interest, costs and fees relating to this claim)
- (v) CHF 24,000.00 in principal amount of ISIN XS0274445120 (plus all interest, costs and fees relating to this claim)
- (vi) CHF 22,000.00 in principal amount of ISIN XS0302351266 (plus all interest, costs and fees relating to this claim)
- (vii) CHF 19,000.00 in principal amount of ISIN CH0027120663 (plus all interest, costs and fees relating to this claim)

Tel: N/A

# 08-13555-mg Doc 51765 Filed 01/06/16 Entered 01/06/16 12:03:04 Main Document Pg 2 of 36

Last Four Digits of Acct. #: N/A

Last Four Digits of Acct. #: N/A

I declare under penalty of perjury that the infor of my knowledge and belief.	rmation provided in this notice	is true a	and correct to the	e best
Ву:	Date:	4	TANJORY	20.6
Transferee'S Agen <b>Duncan R</b>	obertson			
Penalty for making a false statement: Find Mapaging Simon Glennie Director	Director 200 of Imprisonment for up to 5 years,	, or both. 1	8 U.S.C. §§ 152 & 3	571.

PROGRAM SECURITY

# AGREEMENT AND EVIDENCE OF TRANSFER OF CLAIM LEHMAN PROGRAM SECURITY

#### TO: THE DEBTOR AND THE BANKRUPTCY COURT

- For value received, the adequacy and sufficiency of which are hereby acknowledged, The Värde 1. Fund VI-A, L.P. ("Seller") hereby unconditionally and irrevocably sells, transfers and assigns to Deutsche Bank AG, London Branch (the "Purchaser"), and Purchaser hereby agrees to purchase, as of the date hereof, (a) an undivided interest, to the extent of the applicable amounts specified in Schedule I hereto, in Seller's right, title and interest in and to the Proof of Claim Numbers set forth on Schedule 1 filed by or on behalf of Seller or any of Seller's predecessors-in-title (copies of which are attached at Schedule 4 hereto) (the "Proofs of Claim") as is specified in Schedule 1 hereto (the "Purchased Portion") against Lehman Brothers Holdings, Inc., debtor in proceedings for reorganization (the "Proceedings") in the United States Bankruptcy Court for the Southern District of New York (the "Court"), administered under Case No. 08-13555 (JMP) (the "Debtor"), (b) all rights and benefits of Seller relating to the Purchased Portion, including without limitation (i) any right to receive cash, securities, instruments, interest, damages, penalties, fees or other property, which may be paid or distributed with respect to the Purchased Portion or with respect to any of the documents, agreements, bills and/or other documents (whether now existing or hereafter arising) which evidence, create and/or give rise to or affect in any material way the Purchased Portion, whether under a plan or reorganization or liquidation, pursuant to a liquidation, or otherwise, (ii) any actions, claims (including, without limitation, "claims" as defined in Section 101(5) of Title 11 of the United States Code (the "Bankruptcy Code")), rights or lawsuits of any nature whatsoever, whether against the Debtor or any other party, arising out of or in connection with the Purchased Portion, (iii) any rights and benefits arising out of or in connection with any exhibit, attachment and/or supporting documentation relating to the Purchased Portion, and (iv) any and all of Seller's right, title and interest in, to and under the transfer agreements, if any, under which Seller or any prior seller acquired the rights underlying or constituting a part of the Purchased Portion, but only to the extent related to the Purchased Portion, (c) any and all proceeds of any of the foregoing (collectively, as described in clauses (a), (b), and (c), the "Transferred Claims"), and (d) the security or securities (any such securities, the "Purchased Securities") relating to the Purchased Portion and specified in Schedule 1 attached hereto. For the avoidance of doubt, Purchaser does not assume and shall not be responsible for any obligations or liabilities of the Seller related to or in connection with the Transferred Claims, Purchased Securities or the Proceedings,
- Seller hereby represents and warrants to Purchaser that: (a) the Proofs of Claim were duly and timely filed on or before 5:00 p.m. (prevailing Eastern Time) on November 2, 2009 in accordance with the Court's order setting the deadline for filing proofs of claim in respect of "Lehman Program Securities"; (b) the Proof of Claim relates to one or more securities expressly identified on the list designated "Lehman Programs Securities" available on http://www.lehman-docket.com as of July 17, 2009; (c) Seller owns and has good and marketable title to the Transferred Claims, free and clear of any and all liens, claims, set-off rights, security interests, participations, or encumbrances created or incurred by Seller or against Seller; (d) Seller is duly authorized and empowered to execute and perform its obligations under this Agreement and Evidence of Transfer of Claim; (e) the Proofs of Claim include the Purchased Portion specified in Schedule 1 attached hereto; (f) Seller has not engaged in any acts, conduct or omissions, or had any relationship with the Debtor or its affiliates, that will result in Purchaser receiving in respect of the Transferred Claims proportionately less payments or distributions or less favorable treatment than other unsecured creditors; (g) the Transferred Claims are Class 5 claims against the Debtor in the Proceedings; (h) on or around the dates set forth on Schedule 2, Seller received the distributions in the amounts set forth on Schedule 2 relating to the Transferred Claims; (i) on or about the dates set forth on Schedule 3, Seller received the distributions in the amounts set forth on Schedule 3 made by Lehman Brothers Treasury Co. B.V., with respect to the securities relating to the Transferred Claims; and (j) other than the distributions set out in Schedule 2 and Schedule 3, Seller has not received any other distributions in respect of the Transferred Claims or the Purchased Securities.
- 3. Seller hereby waives any objection to the transferr of the Transferred Claims to Purchaser on the books and records of the Debtor and the Court, and hereby waives to the fullest extent permitted by law any notice or right to receive notice of a hearing pursuant to Rule 3001(e) of the Federal Rules of Bankruptcy Procedure, the Bankruptcy Code, applicable local bankruptcy rules or applicable law, and consents to the substitution of Seller by Purchaser for all purposes in the case, including, without limitation, for voting and distribution purposes with respect to the Transferred Claims. Purchaser agrees to file a notice of transfer with the Court pursuant to Federal Rule of

Bankruptcy Procedure 3001(e) including this Agreement and Evidence of Transfer of Claim. Seller acknowledges and understands, and hereby stipulates, that an order of the Court may be entered without further notice to Seller transferring to Purchaser the Transferred Claims, recognizing Purchaser as the sole owner and holder of the Transferred Claims, and directing that all payments or distributions of money or property in respect of the Transferred Claim be delivered or made to Purchaser.

- 4. All representations, warranties, covenants and indemnities shall survive the execution, delivery and performance of this Agreement and Evidence of Transfer of Claim and the transactions described herein. Purchaser shall be entitled to transfer its rights hereunder without any notice to or the consent of Seller. Seller hereby agrees to indemnify, defend and hold Purchaser, its successors and assigns and its officers, directors, employees, agents and controlling persons harmless from and against any and all losses, claims, damages, costs, expenses and liabilities, including, without limitation, reasonable attorneys' fees and expenses, which result from Seller's breach of its representations and warranties made herein.
- 5. Seller shall promptly (but in any event no later than three (3) business days) remit any payments, distributions or proceeds received by Seller on or after May 6, 2015 in respect of the Transferred Claims or the Purchased Securities to Purchaser. Seller has transferred, or shall transfer as soon as practicable after the date hereof, to Purchaser each Purchased Security to such account, via Euroclear or Clearstream (or similar transfer method), as Purchaser may designate in writing to Seller. This Agreement and Evidence of Transfer of Claim supplements and does not supersede any confirmation, any other automatically generated documentation or any applicable rules of Euroclear or Clearstream (or similar transfer method) with respect to the purchase and sale of the Purchased Security.
- 6. Each of Seller and Purchaser agrees to (a) execute and deliver, or cause to be executed and delivered, all such other and further agreements, documents and instruments and (b) take or cause to be taken all such other and further actions as the other party may reasonably request to effectuate the intent and purposes, and carry out the terms, of this Agreement and Evidence of Transfer of Claim, including, without limitation, cooperating to ensure the timely and accurate filing of any amendment to the Proof of Claim.
- 7. Seller's and Purchaser's rights and obligations hereunder shall be governed by and interpreted and determined in accordance with the laws of the State of New York (without regard to any conflicts of law provision that would require the application of the law of any other jurisdiction). Seller and Purchaser each submit to the jurisdiction of the courts located in the County of New York in the State of New York. Each party hereto consents to service of process by certified mail at its address listed on the signature page below.

IN WITNESS WHEREOF, this AGREEMENT AND EVIDENCE OF TRANSFER OF CLAIM is executed this 44 day of December 2014.

Junay 2011

The Värde Fund VI-A, L.P.

By: Värde Investment Partners G.P., LLC, Its General

Partner

By: Värde Partners, L.P., Its Managing Member

By: Värde Partners, Inc., Its General Partner

Name: Title:

Scott T. Harlman Managing Director

Address:

901 Marquette Ave S., Suite 3300

Minneapolis, MN 55402 Attn: Edwina Steffer Email: esteffer@varde.com DEUTSCHE BANK AG, LONDON BRANCH

By: <u>V</u> Name: Title:

Winchester House 1, Great Winchester Street London EC2N 2DB ENGLAND Attn: Michael Sutton

Transferred Claims

Lehman Programs Securities and Purchased Portion to which Transfer Relates

			Principal /	NISI		USD Allowed
ISIN / CUSIP	Issuer	Guarantor	Notional Amount	CC	POC#	Amount
XS0228154158	Lehman Brothers Treasury Co. BV Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	57,000.00 CHF	CHF	44551	50,846.42
XS0268576609	Lehman Brothers Treasury Co. BV Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	23,000.00 CHF 44575	CHF	44575	20,710.79
CH0027120655	Lehman Brothers Treasury Co. BV   Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	46,000.00 CHF 44572	CHF	44572	41,158.49
XS0226787447	Lehman Brothers Treasury Co. BV Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	24,000.00 CHF 44552	CHF	44552	21,409.01
XS0274445120	Lehman Brothers Treasury Co. BV Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	24,000.00 CHF 44611	R	44611	21,409.02
XS0302351266	Lehman Brothers Treasury Co. BV Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	22,000.00 CHF 44606	CHF	44606	19,663.53
CH0027120663	Lehman Brothers Treasury Co. BV   Lehman Brothers Holdings Inc.	Lehman Brothers Holdings Inc.	19,000.00 CHF 44571	CHF	44571	16,948.81

Schedule 1-1

DB Ref. [ ]

# LBHI DISTRIBUTIONS

		USD Allowed								
ISIN / CUSIP	POC#	Amount	17-Apr-12	1-0ct-12	4-Apr-13	3-Oct-13	3-Apr-14	2-0ct-14	2-Apr-15	2-Oct-15
XS0228154158	44551	50,846.42	1,835.16	1,238.40	1,564.19	1,854.53	2,014.45	1,511.84	1,031.74	786.93
XS0268576609	44575	20,710.79	747.49	504.42	637.12	755.38	820.52	615.80	420.25	320.53
CH0027120655	44572	41,158.49	1,485.50	1,002.44	1,266.16	1,501.18	1,630.63	1,223.78	835.16	636.99
XS0226787447	44552	21,409.01	772.70	521.43	658.60	780.85	848.18	636.56	434.41	331.33
XS0274445120	44611	21,409.02	772.70	521.43	658.60	780.85	848.19	636.56	434.41	331.33
XS0302351266	44606	19,663.53	709.70	478.92	604.91	717.19	779.03	584.66	398.99	304.32
CH0027120663 44571	44571	16,948.81	611.72	412.80	521.39	618.17	671.48	503.94	343.91	262.31

Schedule 1-1

Schedule ?

LBT DISTRIBUTIONS

	SIS	Principal /				,		
ISIN	පු	Notional Amount	8-May-13	28-Oct-13	28-Apr-14	27-0ct-14	28-Apr-15	29-0ct-15
XS0228154158	CHF	57,000.00	5,267.28	2,080.69	2,212.59	1,806.13	1,229.53	948.03
XS0268576609	GH	23,000.00	2,084.74	823.52	875.72	714.85	486.64	375.22
CH0027120655	Ğ.	46,000.00	4,369.91	1,726.21	1,835.64	1,498.43	1,020.06	786.60
XS0226787447	CHF	24,000.00	2,132.59	842.42	895.82	731.26	497.81	383.83
XS0274445120	CHF	24,000.00	2,290.80	904.92	962.28	785.51	534.74	412.31
XS0302351266	품	22,000.00	2,067.18	816.58	868.35	708.83	482.54	372.06
CH0027120663	품	19,000.00	1,782.59	704.16	748.80	611.24	416.11	320.91

Schedule 4

Proofs of Claim

Lehman Brother	ankruptcy Court/Souther s Holdings Claims Proces plcy Solutions, LLC D. Box 5076		PRO	CURITIES PROGRAMS OF OF CLAIM
In Re:	s Holdings Inc., ct al.,	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)	Filed: USBC Lehman	; - Southern District of New York Brothers Holdings Inc., Et Al. 08-13555 (JMP) 0000044551
Note: This for	rm may not be used I man Programs Secur <u>Inman-docket.com</u> as	o file claims other than t ities as listed on of July 17, 2009	those	
Creditor) Luzerner Kanto Legal & Compli Pilatusstrasse 1 CH-6002 Luzer T: +41 41 206 2	onalbank AG lance Department 12 n 24 86 / Mail; peter.feld er: E	Baker & ett. Ira A 1114 Av New Yor	send all notices also to: McKenzie LLP Reid enue of the Americas rk, 10036, US 2 626 4100 / Mail: Ira.a.reid@bak	Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of
Telephone numb		mail Address:		statement giving particulars.
Programs Securiand whether such dollars, using the you may attach a Amount of Chair Check this b	ties as of September 13, a claim matured or became exchange rate as applicate schedule with the claim 5'050'815.26 box if the amount of claim International Securities I spect to more than one L	the fixed or liquidated before of the on September 15, 2008. If amounts for each Lehman Program (Require in includes interest or other characteristics)	r after September 15, 2008. The claim f you are filing this claim with respect ograms Security to which this claim re plus accrued and accruing permitted by agreement of arges in addition to the principal amount.	I II COOK TO THE THE THE
		Sumber (ISIN): XS0228	154158 (Required)	
3. Provide the Cl appropriate (each from your account than one Lehman relates.  Clearstream Banumber;	earstream Bank Blocking , a "Blocking Number") alholder (i.e. the bank, br Programs Security, you ank Blocking Number, E	Number, a Euroclear Bank E for each Lehman Programs So oker or other entity that holds may attach a schedule with th uroclear Bank Electronic In	Electronic Reference Number, or other ecurity for which you are filing a claim such securities on your behalf). If you ele Blocking Numbers for each Lehman astruction Reference Number and of	depository blocking reference number, as n. You must acquire a Blocking Number u are filing this claim with respect to more n Programs Security to which this claim with this claim to their depository blocking reference
	nbers see attachn		Required)	Company Securities for which
accountholder (i.	e, the bank, broker or oth Clear Bank S.A.,	er entity that holds such secur BE-Brussels	rities on your behalf). Beneficial hold	our Lehman Programs Securities for which ry participant account number from your lers should not provide their personal account
Accountholders	Euroclear Bank, Clear	stream Bank or Other Depo	sitory Participant Account Number	:
consent to, and and disclose your ide	rroclear Bank, Clearstr re deemed to have author ntity and holdings of Leh is and distributions.	cam Bank or Other Deposit ized, Euroclear Bank, Clearst man Programs Securities to t	Required) ory: By filing this claim, you tream Bank or other depository to the Debtors for the purpose of	FOR COURT USE ONLY FILED   RECEIVED
Date. 2009, Oct. 23	of the creditor or other number if different from	person authorized to file this in the notice address above. A	Sign and print name and title, if any, claim and state address and telephone stach copy of power of attorney, if	EPIQ BANKRUPTCY SOLUTIONS, LLC
1)	for anymouting freeholes	claim: Fine of up to \$500.0	100 or imprisonment for up to 5 years,	OL OOM: 10 O.O.O. 33 122 112

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United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076	LEHMAN SECURITIES PROGRAMS PROOF OF CLAIM
In Re: Lehman Brothers Holdings Inc., et al., Debtors.  Chapter 11 Case No. 08-13555 (IMP) (Jointly Administered)	Filed: USBC - Southern District of New York Lehman Brothers Holdings Inc., Et Al. 09-13555 (JMP) 0000044552
Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on <a href="http://www.lehman-docket.com">http://www.lehman-docket.com</a> as of July 17, 2009	
Luzerner Kantonalbank AG Baker & McKer Legal & Compliance Department att. Ira A. Reld	Il notices also to: Inzie LLP Court Claim Number: (If known) If the Americas IS6, US Filed on: 4100 / Mall: ira.a.reid@bakernet.com
Name and address where payment should be sent (if different from above)	Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
M Check this box if the amount of claim includes interest or other charges in  Provide the International Securities Identification Number (ISIN) for each this claim with respect to more than one Lehman Programs Security, you may which this claim relates.	September 15, 2008. The claim amount must be stated in United States re filing this claim with respect to more than one Lehman Programs Security, Security to which this claim relates. Plus accrued and accruing interest to the extent permitted by agreement or by law addition to the principal amount due on the Lehman Programs Securities. Lehman Programs Security to which this claim relates. If you are filing altach a schedule with the ISINs for the Lehman Programs Securities to
3. Provide the Clearstream Bank Blocking Number (ISIN): XS02267874 3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electron appropriate (each, a "Blocking Number") for each Lehman Programs Security from your accountholder (i.e. the bank, broker or other entity that holds such st than one Lehman Programs Security, you may attach a schedule with the Blocking Number, Euroclear Bank Electronic Instructions.	sic Reference Number, or other depository blocking reference number, as for which you are filing a claim. You must acquire a Blocking Number ecurities on your behalf). If you are filing this claim with respect to more king Numbers for each Lehman Programs Security to which this claim
number: Blocking numbers see attachment (Require	red)
4. Provide the Clearstream Bank, Euroclear Bank or other depository participa you are filing this claim. You must acquire the relevant Clearstream Bank, Eu accountholder (i.e. the bank, broker or other entity that holds such securities or numbers. Euroclear Bank S.A., BE-Brussels  Accountholders Euroclear Bank, Clearstream Bank or Other Depository  Account number 94218 (Require	ant account number related to your Lehman Programs Securities for which proclear Bank or other depository participant account number from your in your behalf). Beneficial holders should not provide their personal account Participant Account Number:
5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: B consent to, and are deemed to have authorized, Euroclear Bank, Clearstream B disclose your identity and holdings of Lehman Programs Securities to the Deb reconciling claims and distributions.	sy filing this claim, you Bank or other depository to stors for the purpose of OCT 2 3 2009
of the creditor or other person authorized to file this claim a number if different from the notice address above. Attach company, Baker & McKenzie LLP	opy of power of attorney, if EPIQ BANKRUPTCY SOLUTIONS, LLC

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Name and address of Creditors (and name and address where notices should be sent if different from Creditors)   Pleases sent all notices also to: Beaver a Morkenzele LLP at Ira A. Reid 1114 Avenue of the Americas   Court Claim Number: (If Aronn)   Pleases sent all notices also to: Beaver a Morkenzele LLP at Ira A. Reid 1114 Avenue of the Americas   New York, 10036, US   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 7 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 86 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: poler fielder@lukb.ch   T+ 41 41 206 24 80 Mail: p	In Re: Lehman Brother		Case No. 08-13555		Lehman Brothers H	oldings Inc., Et Al.
Please send all notices also to: Baker & McKenzile LLP att. Irak A Reid (Jr. Amount)   Filed on: Filed o	based on Leh	man Programs Securi	ties as listed on			
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008, and whether such claim matured or became fixed or liquidated before or after September 15, 2008, and the state of United States dollars, using the exchange rate as applicable on September 15, 2008, if you are filing this claim with respect to more than one Lehman Programs Security, you may attach a sechedule with the claim amounts for each Lehman Programs Security to which this claim relates 10 to the extent plus accrued and accruing Interest to the extent plus accrued and accruing Interest to the extent plus accrued and accruing Interest to the textent plus accrued and accruing Interest to the extent plus accounts the programs Security on the principal amount due on the Lehman Programs Security on the principal amount due on the Lehman Programs Security to the his claim relates.  International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates.  International Securities Identification Number (ISIN): CHOO27120663 (Required)  3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number; all the bank, brocker or other thing that holds such securities on your behalf). If you are filing this claim with respec	Creditor) Luzerner Kanto Legal & Compli Pilatusstrasse CH-6002 Luzer T; +41 41 206 2	onalbank AG lance Department 12 n 24 86 / Mail: peter.feld er: En	F E a 1 N er@lukb.ch T nail Address:	Please send all Baker & McKen at. Ira A. Reid 114 Avenue of New York, 1003 : +1 212 626 4	nolices also to: zie LLP f the Americas	claim amends a previously filed claim.  Court Claim Number: (If known)  Filed on: prnet.com  Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of
3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates.  Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number:  Blocking numbers see attachment  (Required)  4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. SIX SIS AG, Baselstrasse 100, CH-4600 Olten Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:  Account number 20090537  (Required)  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securiti	I. Provide the bear programs Securiand whether such dollars, using the you may attach a Amount of Clal Check this.  2. Provide the this claim with reference or the provide the chies claim with reference or the provide the provide the claim with reference or the provide	othl amount of your claim ties as of September 15, 2: a claim matured or became exchange rate as applical schedule with the claim a 1'120'393.12 m: \$ 1'120'393.12 how if the amount of claim International Securities Idespect to more than one Leep 15, 25 and 15 a	based on Lehman P. 008, whether you ow e fixed or liquidated ple on September 15, mounts for each Let in includes interest or	vied the Lehman before or after Si, 2008. If you are inman Programs S Required)	Programs Securines on september 15, 2008. The claim if ling this claim with respect to ecurity to which this claim relipolus accrued and according permitted by agreement or addition to the principal amount of the principal	amount must be stated in United States o more than one Lehman Programs Security, lets.  Interest to the extent by law and the Lehman Programs Securities.  which this claim relates. If you are filing
A. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. SIX SIS AG, Baselstrasse 100, CH-4600 Olten  Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:  Account number 20090537 (Required)  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.  Date. Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if  POCT 2 3 2009  FILED / RECEIVED  OCT 2 3 2009  FILED / RECEIVED	3. Provide the Cl appropriate (each from your accounts on the country of the coun	curities Identification N carstream Bank Blocking n, a "Blocking Number") f	Number, a Euroclea for each Lehman Pro	r Bank Electronic	c Reference Number, or other of which you are filing a claim	are filing this claim with respect to more
4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. SIX SIS AG, Baselstrasse 100, CH-4600 Olten  Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:  ACCOUNT number 20090537 (Required)  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.  Date. Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if  POCT 2 3 2009  FILED   RECEIVED  OCT 2 3 2009  FILED   RECEIVED  OCT 2 3 2009  FILED   RECEIVED  FILED   RECEIVED  OCT 2 3 2009  FILED   RECEIVED  FILED   RECEIVED  OCT 2 3 2009  FILED   RECEIVED	number:					other depository blocking reference
5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.  Date.  Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if  2009 Oct 23  any. Baker, & McKenzie LLP	4. Provide the Clyou are filing this accountholder (in numbers. SIX	earstream Bank, Euroclea s claim. You must acquire c. Iho bank, broker or othe SIS AG, Baselstra Euroclear Bank, Clears	r Bank or other depo e the relevant Clears er entity that holds su asse 100, CH-	ository participan tream Bank, Euro uch securities on 4600 Olten er Depository P	t account number related to you clear Bank or other depository your behalf). Beneficial holde articipant Account Number:	rs should not provide their personal account
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In Re: Lehman Brother Debtors.	s Holdings Inc., et al.,	Chapter I I Case No. 08-13555 (JMP) (Jointly Administered)	Lehman Bro	Southern District of New York others Holdings Inc., Et Al. 3-13555 (JMP) 0000044572
based on Leh	rm may not be used t man Programs Secur chman-docket.com as	to file claims other than those ities as listed on s of July 17, 2009		
Creditor)  Luzerner Kanto Legal & Compl Pilatusstrasse CH-6002 Luzer T: +41 41 206	onalbank AG lance Department 12 rn 24 86 / Mail: peter.felc	Baker & McKe att. Ira A. Reid 1114 Avenue o New York, 100	I notices also to: nzie LLP of the Americas	Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number: (If known)  Filed on: Intercept Check this box if you are aware that anyone clse has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
Programs Securiand whether such dollars, using the you may attach a Amount of Claf	otal amount of your claim ties as of September 15, 2 h claim matured or becam e exchange rate as applica a schedule with the claim 5'145'097.16 box if the amount of claim International Securities It espect to more than one L	cook, whether you when the Lemma he fixed or liquidated before or after the lemma of the consequence of the consequence of the lemma of	september 15, 2008. The claims of filing this claim with respect to Security to which this claim relaplus accrued and accruing permitted by agreement or addition to the principal amount.	Interest to the order
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Date. 2009, Oct. 23	of the creditor or other number if different from any. Baker & Mcl	filing this claim must sign it. Sign a person authorized to file this claim a n the notice address above. Attach co	opy of power of attorney, if	OCT 2 3 2009  EPIQ BANKRUPTCY SOLUTIONS, LLC
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United States Bankruptcy Court/Southern District of New York Lehman Brothers Holdings Claims Processing Center c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076	S		
In Re; Lehman Brothers Holdings Inc., et al., Debtors.  Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)  Chapter 11 Case No. 08-13555 (JMP) Lehman Brothers Holdings Inc., et al., 08-13555 (JMP) 0000044575			
Note: This form may not be used to file claims other than those based on Lehman Programs Securities as listed on http://www.lehman-docket.com as of July 17, 2009			
Name and address of Creditor: (and name and address where notices should be sent if different from Creditor)  Please send all notices also to:  Luzerner Kantonalbank AG  Baker & McKenzie LLP  att. Ira A. Reid  Pliatusstrasse 12  CH-6002 Luzern  T: +41 41 206 24 86 / Mail: peter.felder@lukb.ch  Telephone number:  Name and address where payment should be sent (if different from above)  Please send all notices also to:  Court Claim Number:  (If known)  Filed on:  T: +1 212 626 4100 / Mail: ira.a.reid@bakernet.com  Check this box to indicate that claim amends a previously filed claim amends a previously	e that		
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008 or acquired them thereafter, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be stated in United States dollars, using the exchange rate as applicable on September 15, 2008. If you are filling this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the claim amounts for each Lehman Programs Security to which this claim relates.  Amount of Claim: \$  Check this box if the amount of claim includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.  Provide the International Securities Identification Number (ISIN) for each Lehman Programs Security to which this claim relates.  International Securities Identification Number (ISIN): XS0268576609  (Required)  (Required)			
3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to retain than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates.	more m		
Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number:  Blocking numbers see attachment (Required)			
4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for w you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from you accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal a numbers. Euroclear Bank S.A., BE-Brussels  Accountholders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:	rhich our occount		
Account number 94218  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.	7		
Date.  Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. Baker & McKenzie LLP  Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to \$ years, or both. 18 U.S.C. §§ 152 and 3571			

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Lehman Brothers Holdings Inc., et al., Chapter II Case No. 08-13555 (JMP) Clothy Administered II Case No. 08-1355 (JMP) Clothy Administered II Case No. 08-13555 (JMP) Clothy Administered II Case No. 08-1355 (JMP) Clothy Administered II Clothy Adm	Lehman Brother			LEHMAN SEC	CURITIES PROGRAMS OF OF CLAIM
Note: This form may not be used to file claims other than those based on Lemma Programs Securities as Island on https://www.lemman.clocket.com as of July 17, 2009  Name and address of Creditor: (and name and address where notices should be sen if different from Creditor)  Please send all notices also to: Baker & McKenzio LLP  GLE Compliance Department  I 1114 Avenue of the Americas New York, 1008.  Luzerner Kantonalbank AG  Lagal & Compliance Department  I 1114 Avenue of the Americas New York, 1008.  T +1 21 22 62 4100 / Malt: peter-felder @lutch.och  T +1 21 22 62 4100 / Malt: ira.a.reid@baker  Telephone number:  Email Address:  Telephone number:  Email Address:  I 1. trovide the total amount of your claim based on Lehman Programs Securities. Your claim nanount must be the amount owed under your Lehman Allech copy of statement gliving particular, and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount must be the amount owed under your Lehman Programs Securities. A september 15, 2008. The claim amount must be the amount owed under your Lehman and the school of the sense of	Lehman Brother	s Holdings Inc., et al.,	Case No. 08-13555 (JMP)	Lehman Brothers Ho	orings inc , civiii
Creditor)   Please send all notices also to: Baker & McKenzie LLP   Court Claim amends a previously filed claim.	based on Leh	man Programs Secur.	ities as listed on		
1. Provide the total amount of your claim based on Lehman Programs Securities. Your claim amount must be the amount owed under your Lehman Programs Securities as of September 15, 2008, whether you owned the Lehman Programs Securities on September 15, 2008. The claim amount must be the amount of care and whether such claim matured or became fixed or liquidated before or after September 15, 2008. The claim amount more than one Lehman Programs Security to which this claim ment amount more than one Lehman Programs Security to which this claim relates.  Amount of Claim: \$\frac{2.790'484.70}{\text{Monunt of Claim: S}}\$\frac{2.790'484.70}{\text{Monunt of Claim: Includes interest or other charges in addition to the principal amount due on the Lehman Programs Securities.}  2. Provide the International Securities Identification Number (ISIN): XS0302351266 \text{Monunt of Claim: Repeated to more than one Lehman Programs Security so which this claim relates.}  3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number, burden or other or other entity that holds such securities on your behalf). If you are filling this claim: the programs Security to which the blocking Number or each Lehman Programs Security to which the claim and the programs Securities for	Creditor) Luzerner Kanto Legal & Compl Pilatusstrasse CH-6002 Luzer T: +41 41 206  Telephone numb Name and addre	onalbank AG iance Department 12 n 24 86 / Mail; peter.feld ier: Er ss where payment should	Please send a Baker & McKe att. Ira A. Reic 1114 Avenue New York, 10 er@lukb.ch mail Address: be sent (if different from above)	all notices also to: enzie LLP d of the Americas 036, US	claim amends a previously filed claim.  Court Claim Number: (If known)  Filed on: ernel.com  Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of
3. Provide the Clearstream Bank Blocking Number, a Euroclear Bank Electronic Reference Number, or other depository blocking reference number, as appropriate (each, a "Blocking Number") for each Lehman Programs Security for which you are filing a claim. You must acquire a Blocking Number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). If you are filing this claim with respect to more than one Lehman Programs Security, you may attach a schedule with the Blocking Numbers for each Lehman Programs Security to which this claim relates.  Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number:  Blocking numbers see attachment (Required)  4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filling this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:  Account number 94218  (Required)  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filling this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or Other Depository: By filling this claim, you disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.  Date.  Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address, above. Attach copy of power of attorncy, if  EPIQ BANKRUPTCY SOLUTIONS. LIC	1. Provide the I Programs Securi and whether such dollars, using the you may attach a Amount of Clab  Check this Provide the this claim with re	otal amount of your claim ties as of September 15, 2 in claim matured or became exchange rate as applicate schedule with the claim at 2'790'484.70 ms. \$ 2790'484.70 ms. The amount of claim international Securities Icespect to more than one L.	based on Lehman Programs Securi 1008, whether you owned the Lehme to fixed or liquidated before or after ble on September 15, 2008. If you a amounts for each Lehman Programs (Required)	in Programs Securities on September 15, 2008. The claim re filing this claim with respect to Security to which this claim relipius accrued and accruing permitted by agreement or addition to the principal amount of Lehman Programs Security to	amount must be stated in United States o more than one Lehman Programs Security, ates. interest to the extent by law nt due on the Lehman Programs Securities. which this claim relates. If you are filing
Clearstream Bank Blocking Number, Euroclear Bank Electronic Instruction Reference Number and or other depository blocking reference number:  Blocking numbers see attachment  (Required)  4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filling this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. Euroclear Bank S.A., BE-Brussels  Account holders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:  Account number 94218  (Required)  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.  Date.  Signature: The person filing this claim must sign it. Sign und print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if  EPIQ BANKRUPTCY SOLUTIONS. LC.	3. Provide the Cl appropriate (each	earstream Bank Blocking	Number, a Euroclear Bank Electron for each Lehman Programs Security	nic Reference Number, or other of for which you are filing a claim equities on your hebald. If you	are filing this claim with respect to more
4. Provide the Clearstream Bank, Euroclear Bank or other depository participant account number related to your Lehman Programs Securities for which you are filing this claim. You must acquire the relevant Clearstream Bank, Euroclear Bank or other depository participant account number from your accountholder (i.e. the bank, broker or other entity that holds such securities on your behalf). Beneficial holders should not provide their personal account numbers. Euroclear Bank S.A., BE-Brussels  Account holders Euroclear Bank, Clearstream Bank or Other Depository Participant Account Number:  Account number 94218  (Required)  5. Consent to Euroclear Bank, Clearstream Bank or Other Depository: By filing this claim, you consent to, and are deemed to have authorized, Euroclear Bank, Clearstream Bank or other depository to disclose your identity and holdings of Lehman Programs Securities to the Debtors for the purpose of reconciling claims and distributions.  Date.  Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if  EPIQ BANKRUPTCY SOLUTIONS, I.C.  EPIQ BANKRUPTCY SOLUTIONS, I.C.  EPIQ BANKRUPTCY SOLUTIONS, I.C.	Clearstream Ba		nent .		other depository blacking reference
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Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571	2009, Oct. 23	of the creditor or other p number if different from any. Baker & Mck	person authorized to file this claim a n the notice address above. Attach c (Onzio LLP	opy of power of attorney, if	

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based on Lehman Pro	not be used to file cla ograms Securities as li locket.com as of July	sted on		
Creditor)  Luzerner Kantonalbank Legal & Compliance De Pilatusstrasse 12 CH-6002 Luzern T: +41 41 206 24 86 / M Telephone number:	epartment	Please send al Baker & McKer att. Ira A. Reid 1114 Avenue c New York, 100 ch T: +1 212 626	Il notices also to: nzie LLP of the Americas	Check this box to indicate that this claim amends a previously filed claim.  Court Claim Number: (If known)  Filed on: prnet.com  Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.
Programs Securities as of and whether such claim m dollars, using the exchang you may attach a schedule Amount of Claim: \$\frac{2}{N}\$ Check this box if the	September 15, 2008, whether instruction or became fixed or crate as applicable on September 186'285.46  amount of claim amounts for a september 186'285.46	Lehman Programs Securition you owned the Lehman liquidated before or after Stember 15, 2008. If you are or each Lehman Programs.  (Required)  interest or other charges in the stember 15, 2008.	September 15, 2008. The claim e filing this claim with respect to Security to which this claim releptus accrued and accruing permitted by agreement or addition to the principal amount of the programs Security to	littereat to the average
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